PTO/SB/06 (12-04)
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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875										Application or Docket Number		
APPLICATION AS FILED - P. (Column 1)						PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR			NUMBER FILED		NU	NUMBER EXTRA		RATE (\$) FEE (\$)]	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(a), (b), or (c))						•				1		, == (\(\psi\)
SEARCH FEE (37 CFR 1.16(k), (i), or (m))								<u> </u>		1		
EXAMINATION FEE (37 CFR 1.16(0), (p), or (q))										1		
TOTAL CLAIMS (37 CFR 1.16(i))				minus 2) = •			х =		OR	X =	
INDEPENDENT CLAIMS				*************************************	•			•		1 00		
(37 CFR 1.16(h))			minus 3 = * If the specification and dr			s exceed 100	\dashv	X : = :		-	X =	
FE	PLICATION SIZE E CFR 1.16(s))	sh is ad	sheets of paper, the ap is \$250 (\$125 for small additional 50 sheets or 35 U.S.C. 41(a)(1)(G)			n size fee due for each thereof. See		·				
MU	LTIPLE DEPEND				······································			•				
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL]	TOTAL	
APPLICATION AS AMENDED – PART II												
(Column 1) (Column 2) (Column 3)								SMALL ENTITY		OR	OTHER SMALL I	
AMENDMENT A	9/3/05	CLAII REMAII AFTE AMENDI	NING ER		HIGHEST NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	20		Minus	20	=	$ egthinspace{1.5em} $	×25 =		OR	x50 =	
	Independent (37 CFR 1.16(h))			Minus	"3	=		× 100 =		OR	× 200 =	
ME	Application Size Fee (37 CFR 1.16(s))								J			
<i>4</i>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))							180	•	OR	360	
TOTAL ADD'L FEE										OR	TOTAL ADD'L FEE	·
		(Columi	n 1)		(Column 2	2) (Column 3)	<u></u>					
AMENDMENT B		CLAIN REMAIN AFTE AMENDI	NING R		HIGHEST NUMBER PREVIOUSL PAID FOR			RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
	Total (37 CFR 1.16(i))	•		Minus	**	=	7	x =		OR	x =	
	Independent (37 CFR 1.16(h))	•		Minus	***	=		x =		OR	x =	
	Application Size Fee (37 CFR 1.16(s))						_					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
· · · · · · · · · · · · · · · · · · ·							_	TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".												

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